PTO/SB/47 (09-06) Approved for use through 04/30/2009, OMB 0651-0016
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The attached Request for Customer Number (PTO/SB/125) form.		
PATENT NUMBER (if known)		APPLICATION NUMBER
6,976,178		09/894,812
Completed by (check one):		
Applicant/Inventor		Signature
X Attorney or Agent of record 33,997 (Reg. No.)		Michael B. Ray Typed or printed name
Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		Requester's telephone number
Assignee recorded at F	Reel Frame	<u>Θ////ο</u> 9 Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below.		
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Trais collection of Information is required by 37 CFR 1.383. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S. 0. 12 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete including pathering, preparing, and submitting the completed application from the USPTO. Time will vary depending upon the individual case. Any somemists on the amount of time you require to complete this form and/or suggestions for reducing this burden, about 5e sent to the Chef Information Officer, U.S. Patent and or Takedhave. (Time, U.S. Deartment of Commerce, P.C., Dox 1456, Alexandian V.S. 2251-1440, D.O. TOX 1500 COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop M Correspondence, Commissioner for Patients, P.O. Box 1 cm., 170 Box 1 cm., 180 Box 1 cm.,